		Ap	pication o	1						
PATENT APPLICATION FEE DETERMINATION RECORD					• *	00	14	40	5-1	
CLAIMS AS FILED - PART I (Column 1) (Column 2)						mry	OR	OTHER SMALL		10/0
TOTAL CLAIMS	81			RAI	E	FEE		RATE	FEE	06,
FOR .	MUMBER FILED	NUMBE	RECTRA	BASIC	FEE	370.00	OR	ASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS	S minus 20=	. 6		xs	9=		ОЯ	X\$18-	10 98	8
DEPENDENT CLAIMS /9 minus 3 = 16		X4:	)=		OR	<b>X8</b> 40	1344	30		
MULTIPLE DEPENDENT CLAIM PRESENT				114	-0		OR	+280=	0	<u> </u>
to the difference in column 1 is less than zero, enter "O" in column 2			TOT	AL		OR	TOTAL	3/82	ES	
CLAIMS AS AMENDEO - PART II (Column 1) (Column 2) (Column 3)					ALL (	ENTITY	OR	OTHER		ST A
CLAMS REMAINING	NU PREVI	EST BER DUSLY	PRESENT EXTRA	RA	īΕ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	AVAILABLE
Total	Miraus -	77	-/	xs	9 <del>-</del>		OR	X\$18=	1	AB
Independent •	Minus/	9	-/	X4	2=	/	OR	X844		
FIRST PRESENTATION OF N	IULTIPLE DEPENDEN	TCLAIM		+14		/	88	•280=		СОРҮ
				ADDIT	OTAL		OR	TOTAL ADOIT, FÉT		<b>9</b>
(Column 1)			(Calumn 3)	<u>.                                    </u>	_			·		
CLAMS REMARKNO AFTER AMENOMENT	NU PREV	HESY MBER MOUSLY DFOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	·
AFTER AMENOMENT OF TOTAL OF THE AMENOMENT OF TOTAL OF THE AMENOMENT OF THE		81	•	XS	9=		ОЯ	X318=		2/2/
indepandent • 11	Minus .	19	[-	X	2=		OR	X84=	V	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \
FIRST PRESENTATION OF I	MULTIPLE DEPENDED	TOLAM		١,,	10=		OR	+280=	1	1 ' / /
				<u> </u>	OTAL		OR	101/		
1.11.05 100000			(Column 3)	ADDIT	i. FEE			ADDIT, FE	P.L.	1
CLAMS REMARKS	Feb.	UMM 2) UKESY MBER WOUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL	1	RATE	ADDI- TIONAL PEE	
APTER AMENDMENT	Tainus es	© FOR	- /	╟╥	9=	FER	OR	X\$18-	1	1
	Minus	99	- /	1 I	12×	1	1	-	1/-	1
Independent • C	MULTIPLE DEPENDE	NT CLAIN		J	_	1-/-	- OR	-	<del>/</del> —	1
+140=   OR +280=/									4	
* If the entry in column 1 is less than the entry in column 2, with "O" in column 3.  ** If the entry in column 1 is less than the entry in column 2, with "O" in column 3.  ** If the Tilghest Number Previously Paid For" IN THES SPACE is less than 2, enter "30."  ** ADDIT, FEE  *** The Tilghest Number Previously Paid For" IN THES SPACE is less than 2, enter "3."  The Tilghest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										
FORMPTO-615 (Plan. 6/01)			iga ang-iga- i Sirikil						OF COMMER	व्ह